JCC FINANCING STATEMENT AMENDMI OLLOWINSTRUCTIONS	ENT					
A. NAME & PHONE OF CONTACT AT FILER (optional)		201708180003				
FAYE SMITH 334-564-1962		Shelby Cnty	Judge of Pr			
B. E-MAIL CONTACT AT FILER (optional) ナショルトによいいよいらしないとない		08/18/2017 C	)1:39:42 PM	FILED/CERT		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	····					
FIRST US BANK FKA FIRST UNITED SECURITY BANK 131 WEST FRONT STREET PO BOX 249 THOMASVILLE, AL 36784						
LITOWAS VEDEL, AL 30704		THE ABOV	E SPACE IS FO	R FILING OFFIC	CE USE O	NLY
a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING	STATEMENT AME	NDMENT is to be		
2014100900031 <u>9770</u>			ne REAL ESTATE ment Addendum (Fo		vide Debtor	s name in item 13
. TERMINATION. Effectiveness of the Financing Statement identified Statement	above is terminated	with respect to the securit	y interest(s) of Se	cored Party author	rizing this T	ermination
. ASSIGNMENT (full or partial): Provide name of Assignee in item 7s For partial assignment, complete items 7 and 9 and also indicate affective.			name of Assignor	in item 9		
. CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law	ied above with respec	t to the security interest(s	) of Secured Party	authorizing this C	Continuation	Statement is
. PARTY INFORMATION CHANGE:						_
Check one of these two boxes:	ck <u>one</u> of these three t CHANGE name and/or	address: Complete/	ADD name: Comple	ete itemDELE1		live record name
			7a or 7b, <u>and</u> item 7	cto be o	leleted in ite	m 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information 6a ORGANIZATION'S NAME	Change - provide only	Offe traine (oa or ob)				
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIC	NAL NAME(S)/INIT	TIAL(S)	SUFFIX
. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In 7a. ORGANIZATION'S NAME	nformation Change - provide	only <u>one</u> name (7a or 7b) (use ex	act, full name; do not o	mit, modify, or abbrevial	le any part of t	he Debtor's name)
OR 75. INDIVIDUAL'S SURNAME	<u> </u>					<del></del>
7B. INDIVIDUAL S SURIANAIL						
INDIVIDUAL'S FIRST PERSONAL NAME	<u>.</u>			<u>, , , , , , , , , , , , , , , , , , , </u>		
					<u>., -</u>	SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME	CITY		STATE	POSTAL CODE		SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY		STATE	POSTAL CODE		
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS		DELETE collateral		POSTAL CODE	A	
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			A	COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			AS	COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			A	COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  i. COLLATERAL CHANGE: Also check one of these four boxes:  Indicate collateral:	ADD collateral		RESTATE	covered collateral		COUNTRY  SSIGN collatera
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  i. COLLATERAL CHANGE: Also check one of these four boxes:  Indicate collateral:	ADD collateral	Provide only <u>one</u> name (9a	RESTATE	covered collateral		COUNTRY  SSIGN collatera
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:  Indicate collateral:  NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and process.	ADD collateral	Provide only <u>one</u> name (9a	RESTATE	covered collateral		COUNTRY  SSIGN collatera
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  C. MAILING ADDRESS  I. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  I. NAME of SECURED PARTY of RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and professional	ADD collateral  IS AMENDMENT:  ovide name of authoriz	Provide only <u>one</u> name (9a ting Debtor	RESTATE	covered collateral		COUNTRY  SSIGN collatera
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  c. MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:  Indicate collateral:  NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and process.	ADD collateral  IS AMENDMENT:  ovide name of authoriz	Provide only one name (9a ing Debtor	or 9b) (name of As	covered collateral	Assignmen	COUNTRY  SSIGN collatera